



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1183

<b>SERIAL NUMBER</b> 10/698,190	<b>FILING OR 371(c) DATE</b> 10/31/2003 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1633	<b>ATTORNEY DOCKET NO.</b> CWRU-P01-018
<b>APPLICANTS</b> Barbara Grimpe, Cleveland, OH; Jerry Silver, Cleveland, OH;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/423,082 11/01/2002 and claims benefit of 60/471,447 05/16/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 02/11/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>John Long</i> Allowance Examiner's Signature Initials <i>SL</i>		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 54
<b>INDEPENDENT CLAIMS</b> 14				
<b>ADDRESS</b> 28120				
<b>TITLE</b> Methods of inhibiting glial scar formation				
<b>FILING FEE RECEIVED</b> 1617	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	